



Human Resources Metrics

CCH Board of Directors

Barbara Pryor

Chief Human Resources Officer

March 29, 2019



COOK COUNTY
HEALTH

Metrics

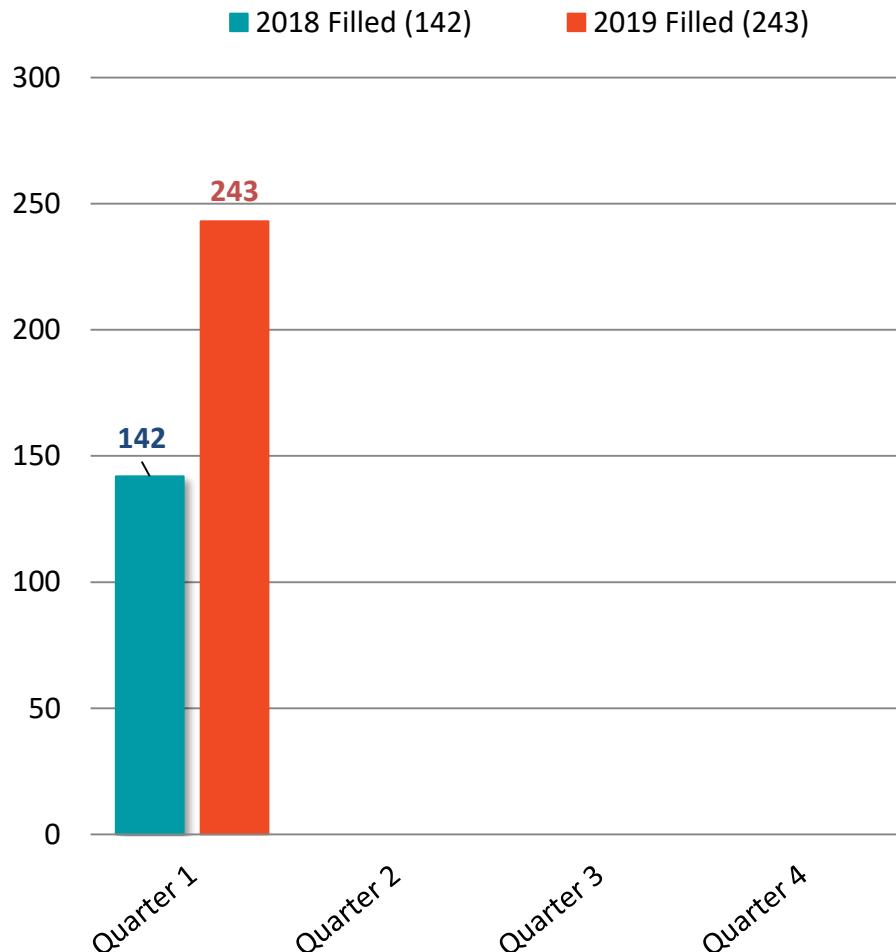


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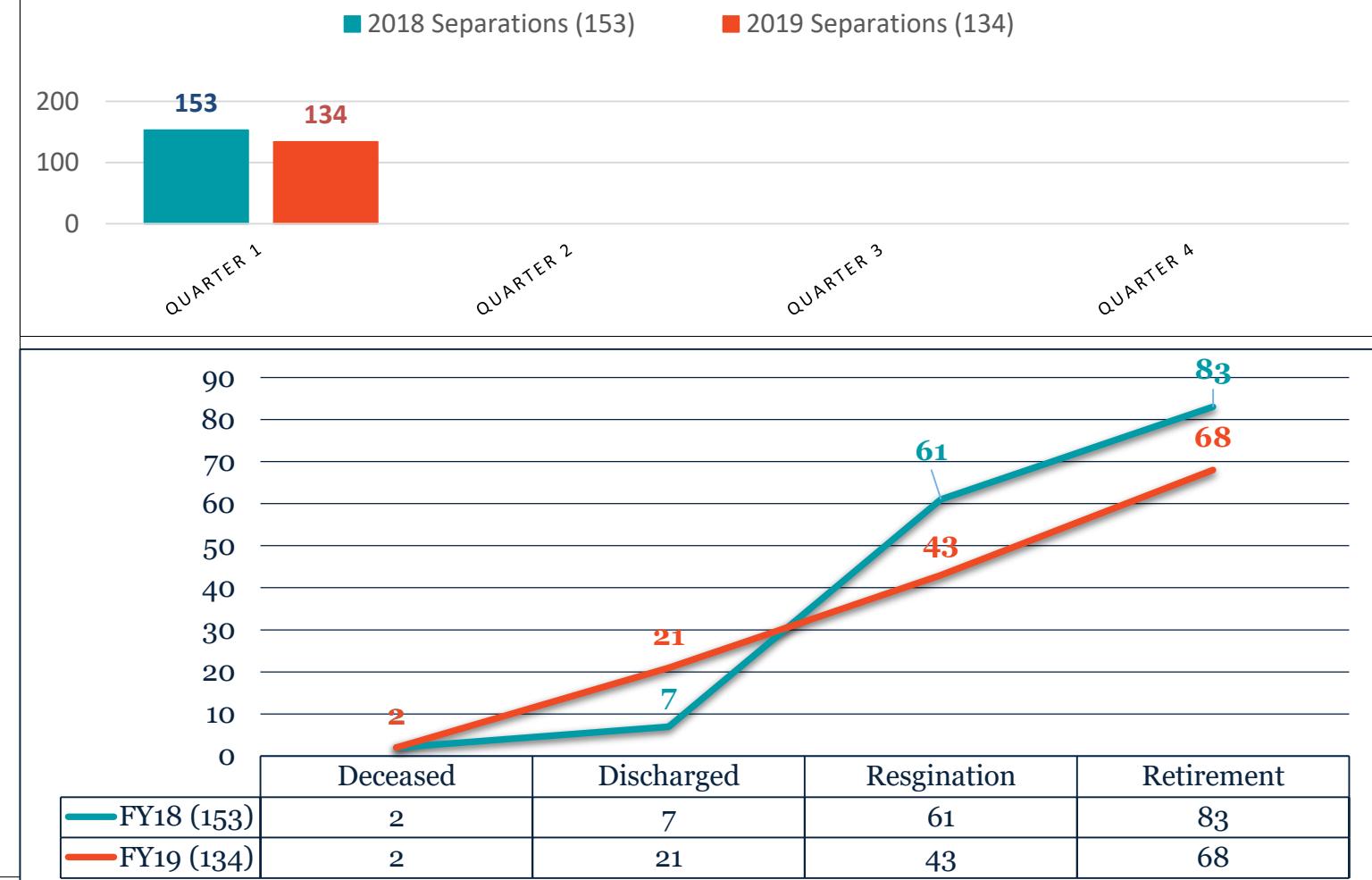
CCH HR Activity Report

Thru 02/28/2019

FILLED POSITIONS



SEPARATIONS



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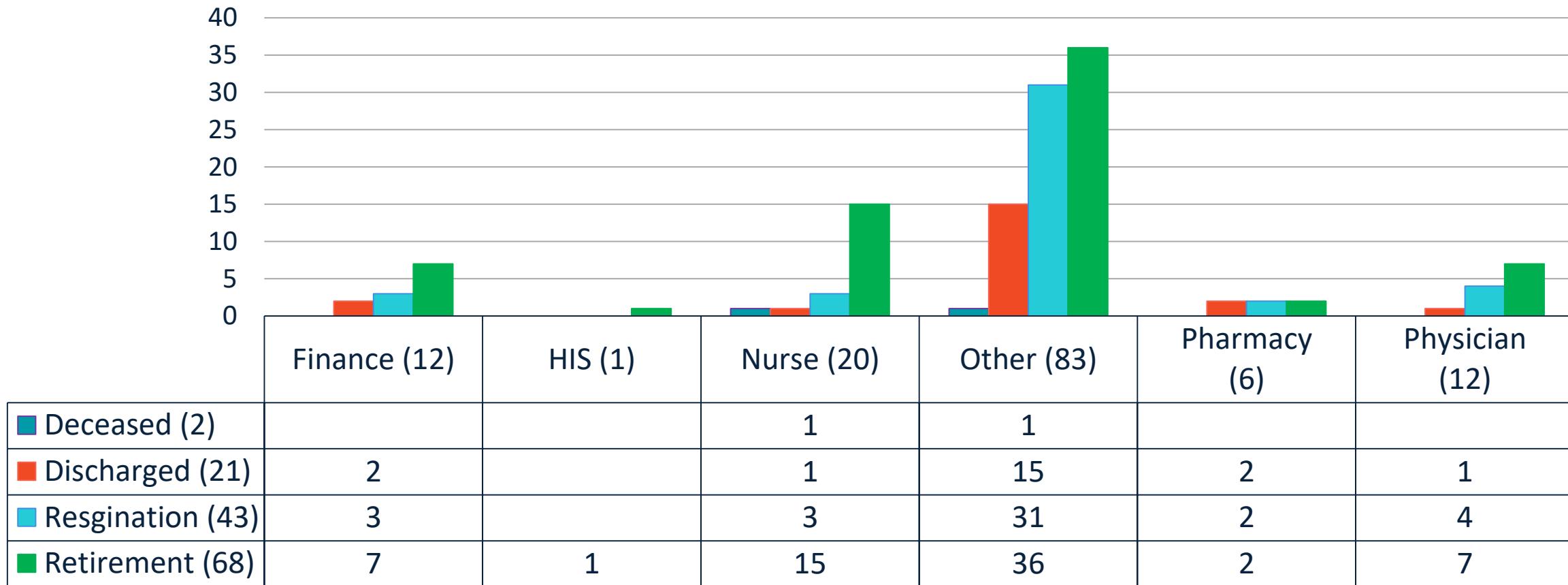
Net New is 25

Does not include Consultants, Registry and House Staff

CCH HR Activity Report

Thru 02/28/2019

SEPARATIONS BY CLASSIFICATION - 134

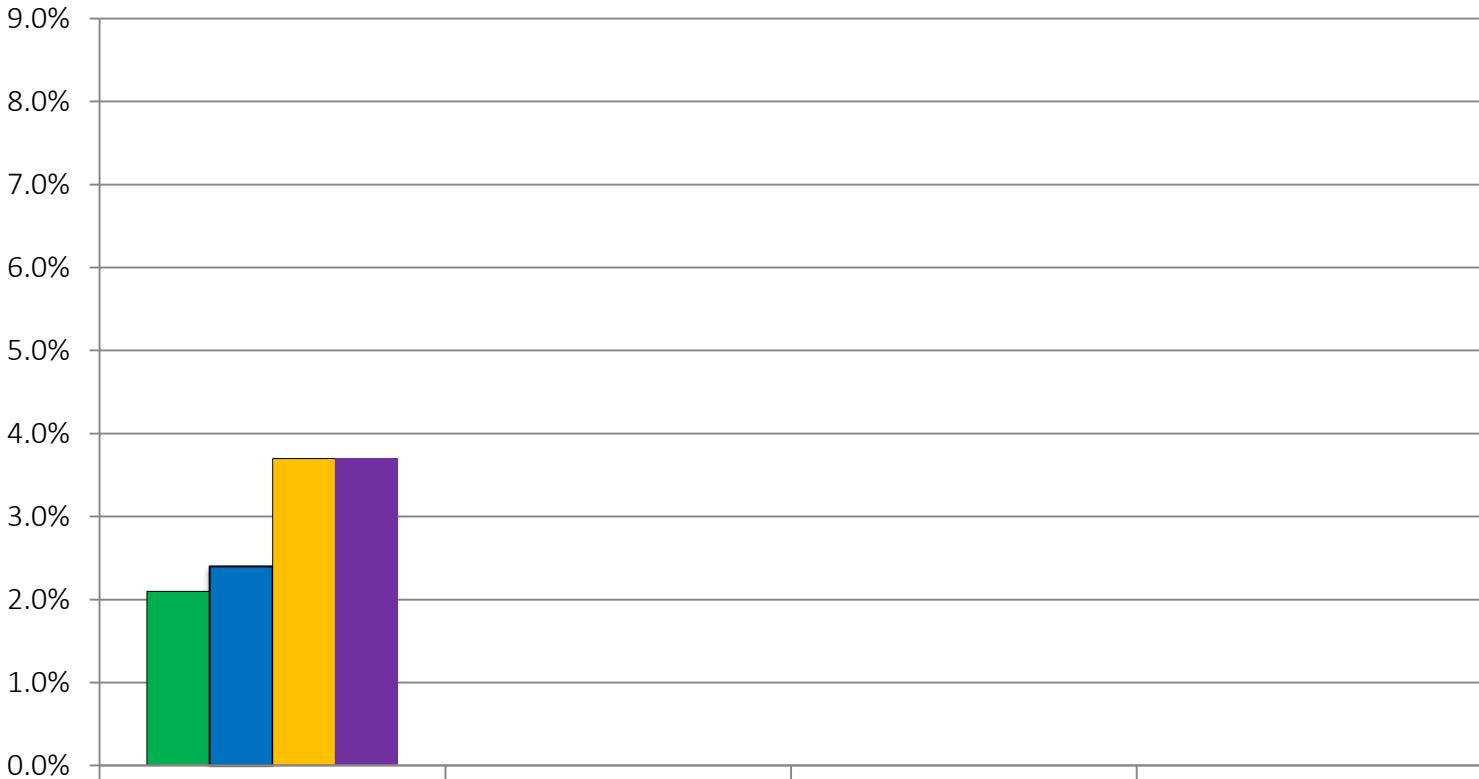


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Does not include Consultants, Registry and House Staff

CCH HR Activity Report – Turnover

CCH TURNOVER
Turnover Year-to-Date
Head Count: 6,373



YTD Cumulative Totals:

FY19 CCHHS Turnover	2.1%
FY18 CCHHS Turnover	2.4%
FY17 U.S. IL Health & Hospital Assoc. Turnover Data	3.7%
FY18 U.S. Dept. of Labor Turnover Data	3.7%

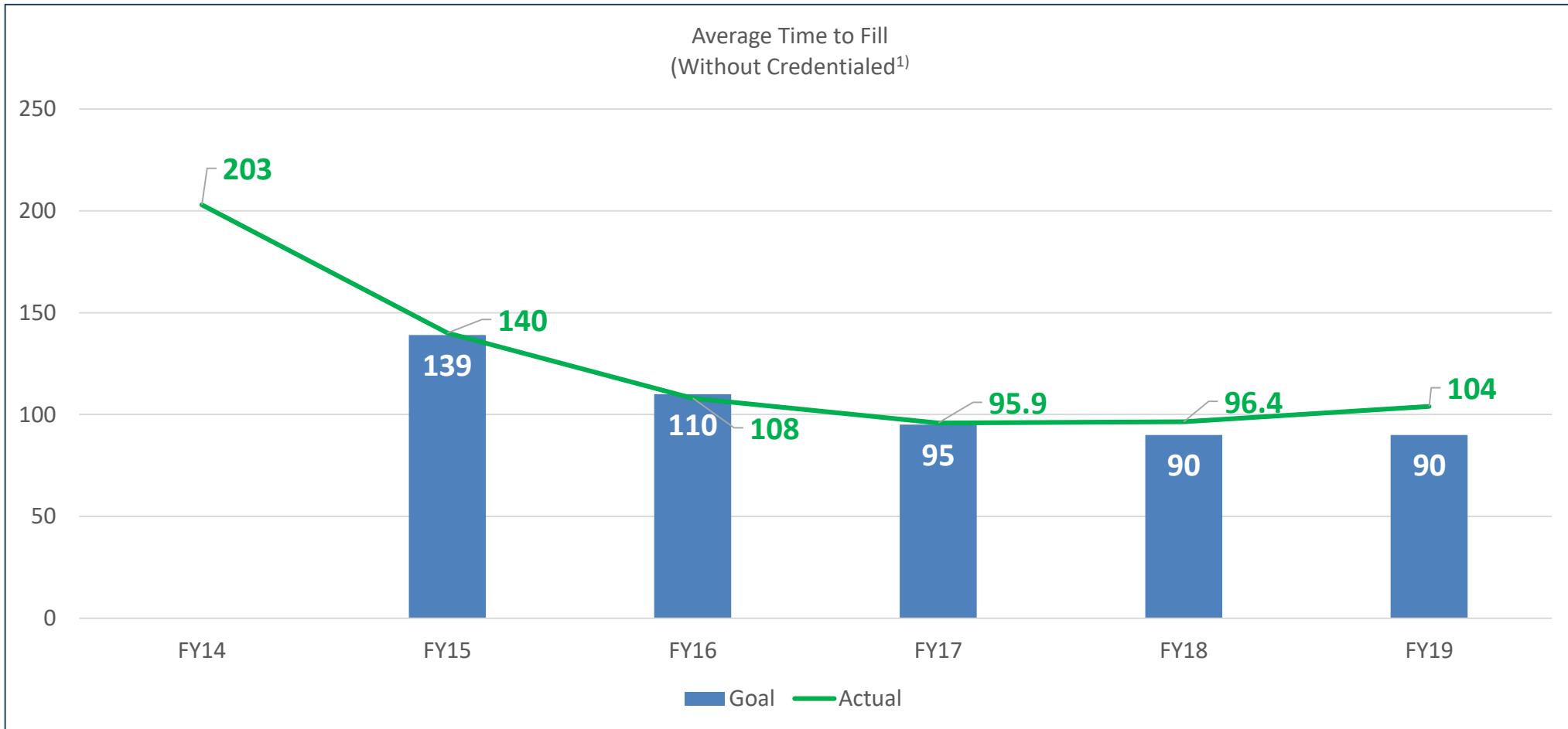


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Include Consultants, Registry and House Staff
FY18 data is through 02/28/2019

CCH HR Activity Report – Open Vacancies

Improve/Reduce Average Time to Hire*

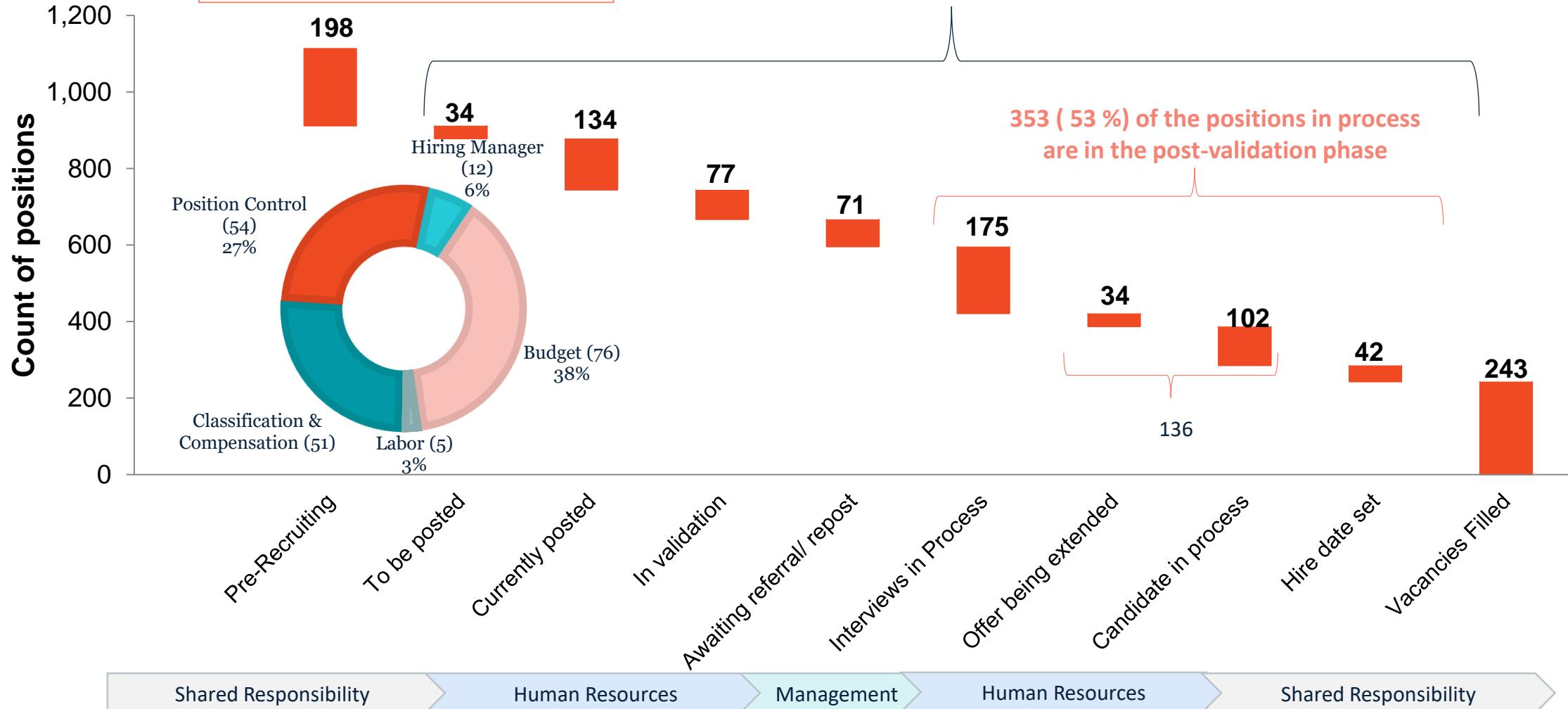


CCH HR Activity Report – Hiring Snapshot

Thru 02/28/2019

Clinical Positions – 525 / 78%
Non-Clinical Positions – 144 / 22%

669 Positions in process



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867 positions in process (Position Control, Budget, Recruiting)

Thank you.



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Appendix

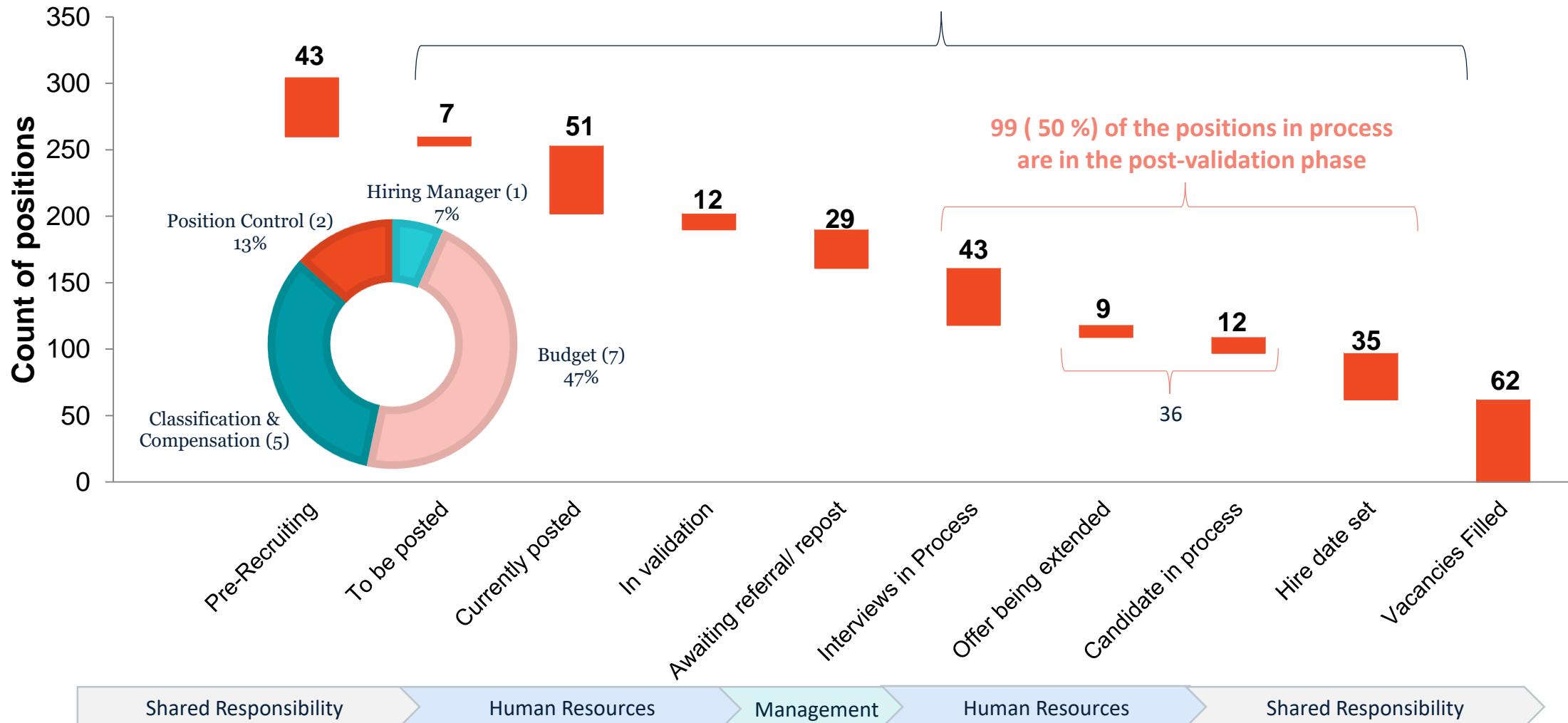


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CCH HR Activity Report – Nursing Hiring Snapshot

Thru 02/28/2019

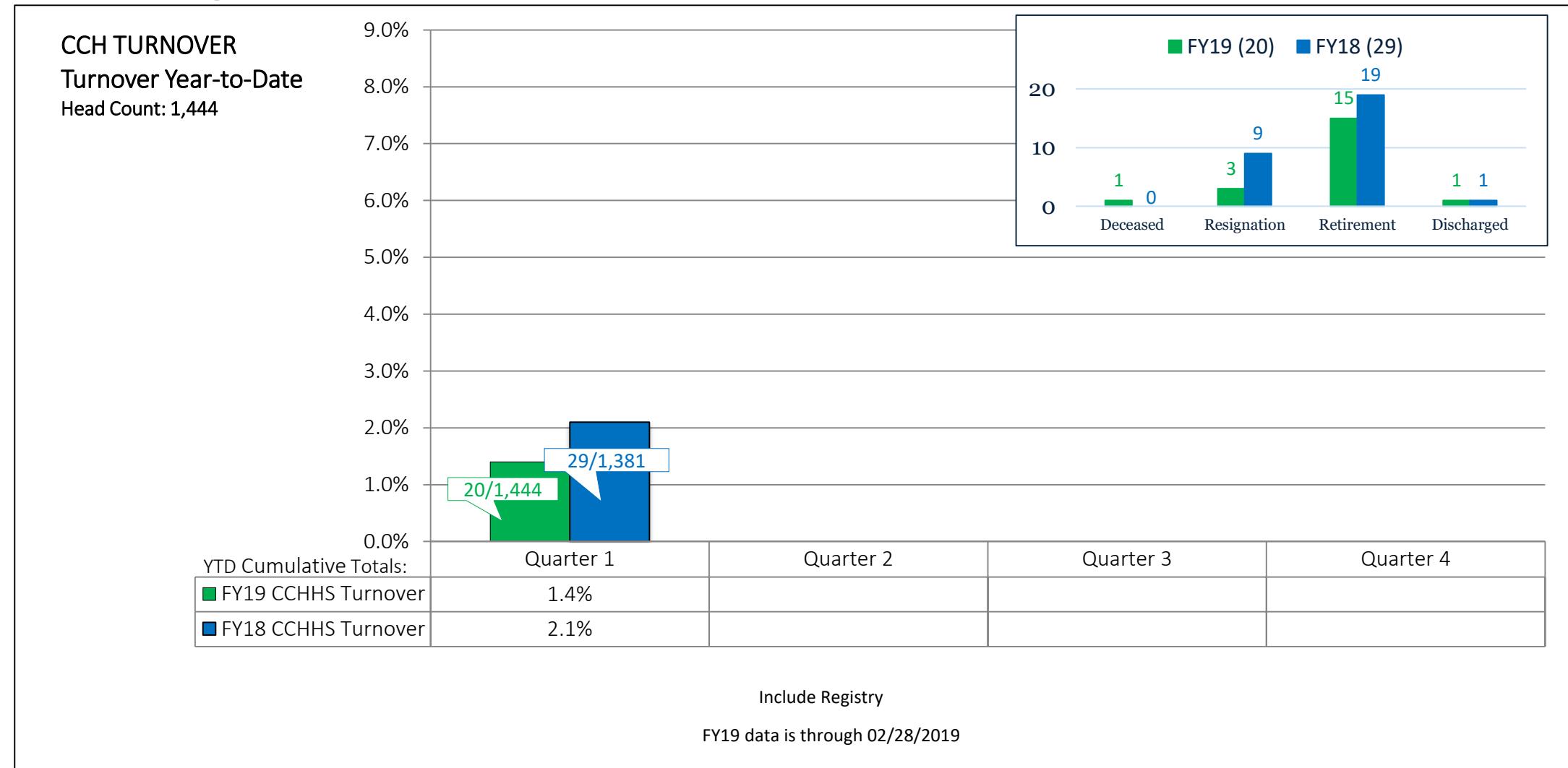
198 Positions in process



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241 Vacant positions

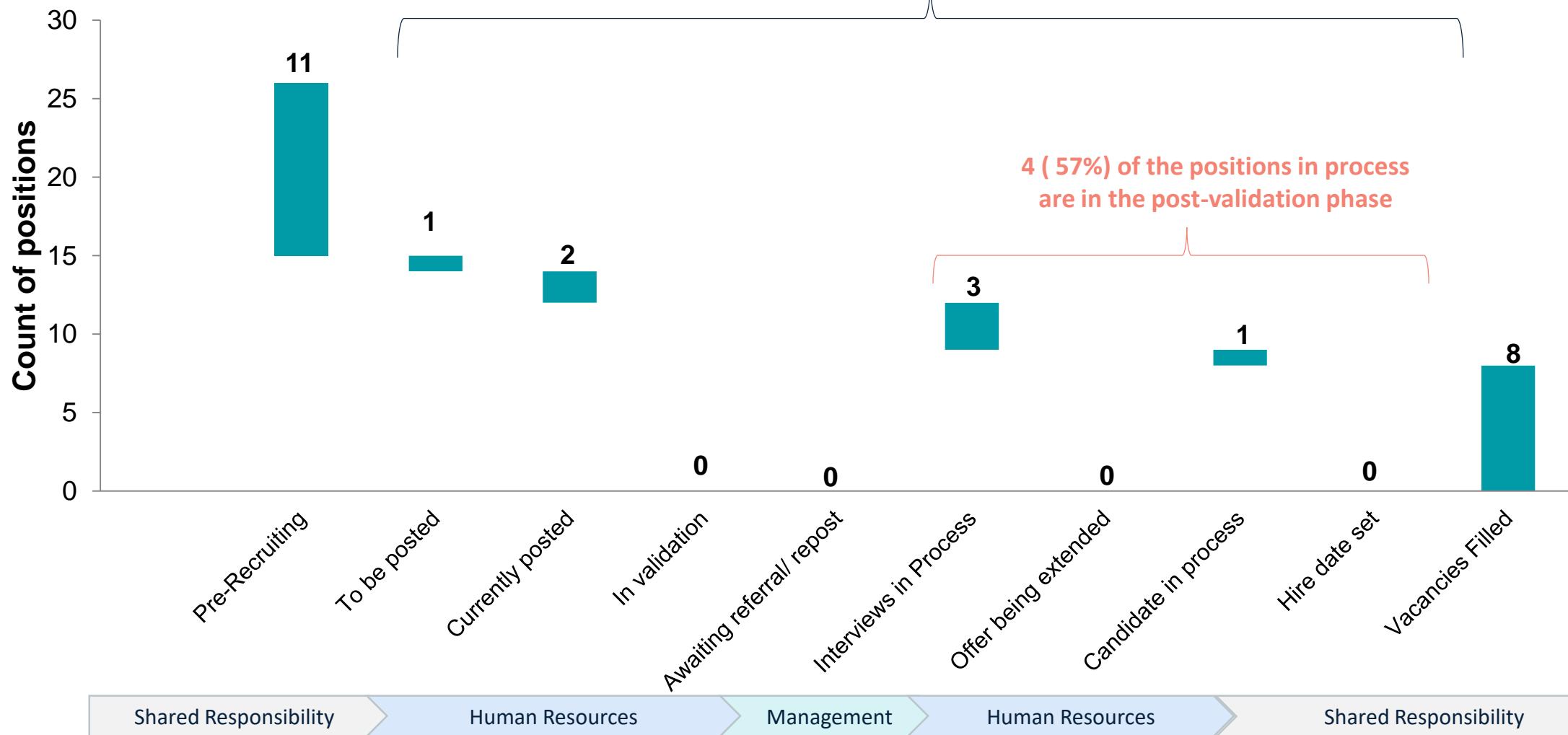
Nursing Activity Report – Turnover



CCH HR Activity Report – Revenue Cycle Hiring Snapshot

Thru 2/28/ 2019

7 Positions in process





Corporate Compliance Report

Board of Directors

March 29, 2019



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Meeting Objectives

Review

Metrics

- Year-Over-Year Comparison
- Metrics
 - Cook County Health as a Provider of Health Care Services
 - CountyCare Medicaid Health Plan

Action

- Annual Education (4-Required Modules)



Corporate Compliance



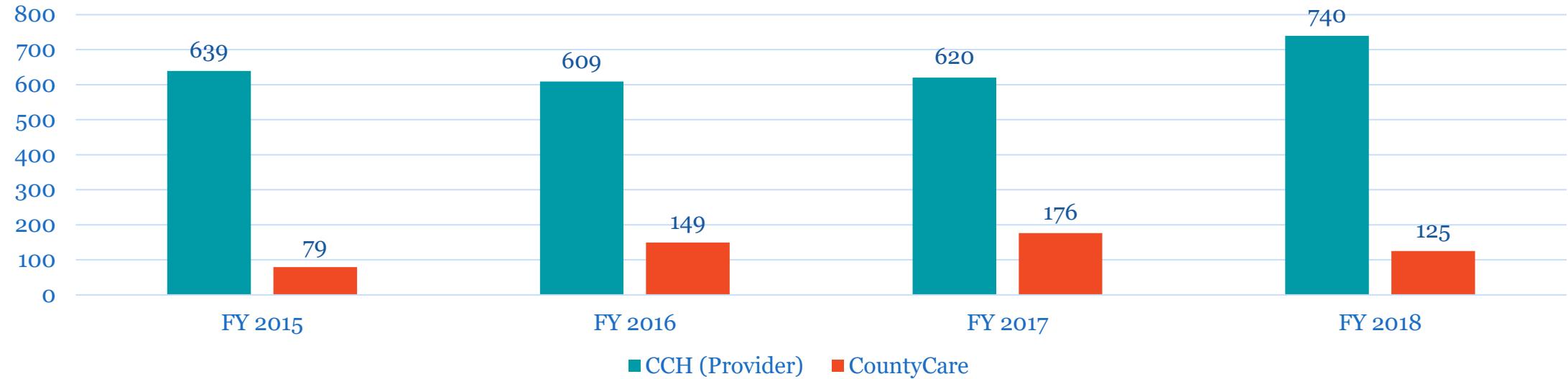
Contact Volumes



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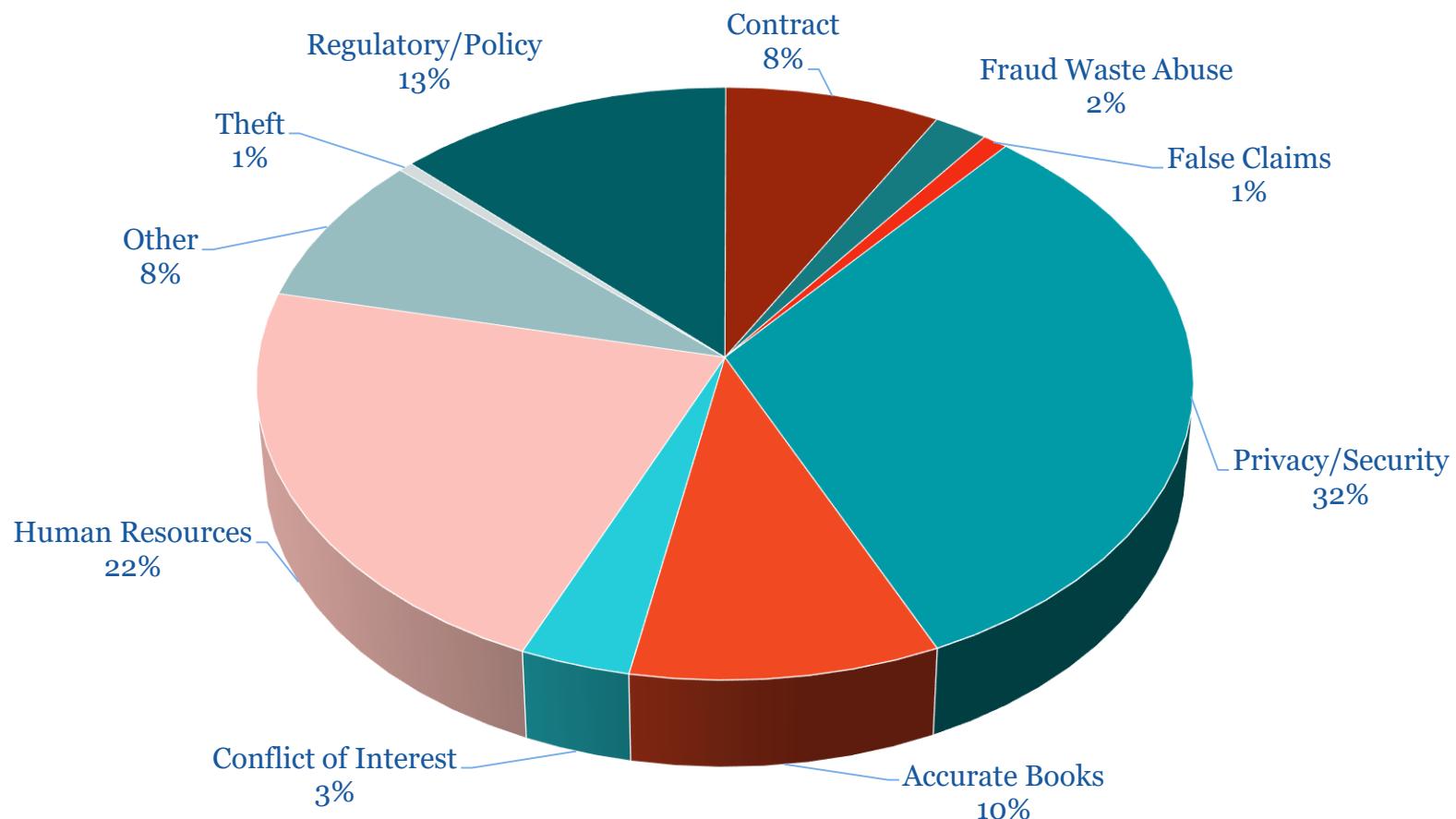
Year-Over-Year Contacts

Separating out CCH as a Provider of Care and as the CountyCare Health Plan



CCH as a Provider of Care

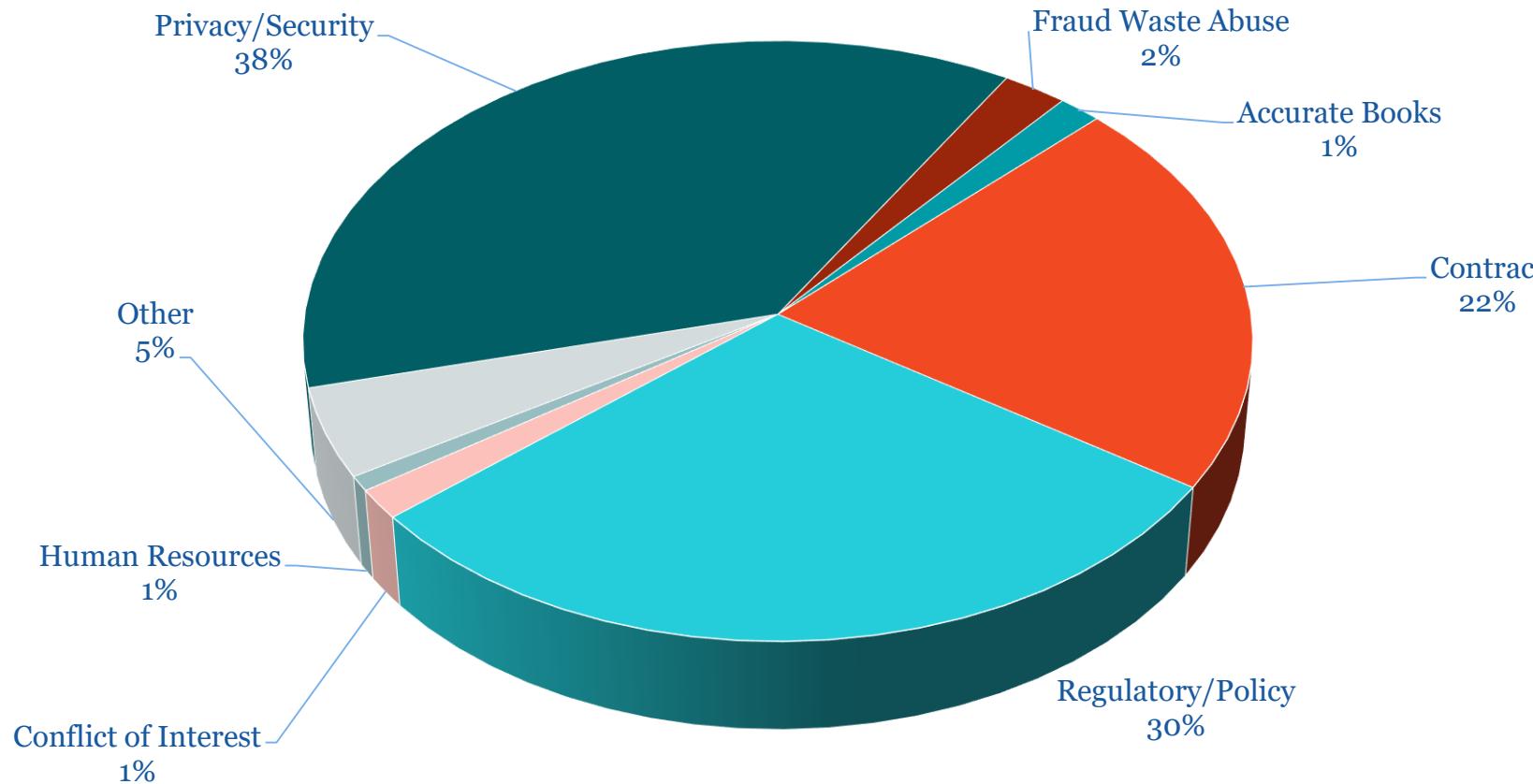
FY 2018 Contacts by Category



Categories	
Privacy/Security (HIPAA)	237
Human Resources	163
Regulatory/Policy	94
Accurate Books	73
Contracts	60
Conflict of Interest	26
Fraud Waste & Abuse	15
False Claims	7
Theft	4
Other	61
	740

CountyCare Health Plan

FY 2018 Contacts by Category



Categories	
Privacy/Security (HIPAA)	47
Regulatory/Policy	37
Contracts	27
Fraud Waste & Abuse	3
Conflict of Interest	2
Accurate Books & Records	2
Human Resources	1
Other	6
	125



CountyCare Fraud, Waste and Abuse Metrics

State Fiscal Year (S-FY) 2018 through S-FY19 Q1

State Required Fields →

S-FY	Reporting Quarter	Tips	Preliminary Investigations	Full Investigations	Referrals to HFS OIG	Provider Audits	Overpayments Identified ^{*2}	Overpayments Collected
18	<u>Q1</u> 07/01 -09/30/17	1	11	3	3	3	\$ 97,910.84	\$ 2,574.00
18	<u>Q2</u> 10/01 – 12/31/17	2	8	9	1	1	\$ 201,038.64	\$ 2,961.36
18	<u>Q3</u> 01/01 – 03/31/18 ^{*1}	70	5	15	2	103	\$ 457,245.29	\$ 6,097.85
18	<u>Q4</u> 04/01 – 06/30/18	6	5	9	2	57	\$2,305.959.74	\$ 28,216.99
19	<u>Q1</u> 07/01 -09/30/18	15	34	11	0	173	\$ 694,801.54	\$ 44,385.25

^{*1} The 3rd Quarter S-FY 18 was significant for CountyCare Compliance. Evolent, CountyCare's TPA for medical and behavioral health hired two (2) local investigators dedicated solely to program integrity efforts. This dedicated team partnered with a data analytics firm to review claims for anomalies. The result of this activity is apparent in the metrics above.

^{*2} The Overpayments Identified column indicates the total amount paid to the provider for the identified inaccurate codes. These amounts may be offset if a provider elects to bill a corrected claim.

Example: The highest level clinic visit is billed to the health plan, reimbursement is \$48, the medical record is reviewed and the documentation validates a lower level. The “Overpayment Identified” is \$48, however the provider may rebill a lower level and expect corresponding reimbursement of \$28.35. This category does not account for the net recovery of \$19.65.



Annual Education

Board Requirement



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Annual Requirement



Questions?



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CountyCare Metrics

Prepared for: CCH Board of Directors

James Kiamos
CEO, CountyCare
March 29, 2019



Current Membership

Monthly membership as of February 7, 2019

Category	Total Members	ACHN Members	% ACHN
FHP	213,771	22,645	10.6%
ACA	72,016	14,700	20.4%
ICP	29,673	6,539	22.0%
MLTSS	5,534	0	N/A
Total	320,994	43,884	13.7%

ACA: Affordable Care Act
FHP: Family Health Plan

ICP: Integrated Care Program
MLTSS: Medicaid Long-Term Service and Support



Managed Medicaid Market

Illinois Department of Healthcare and Family Services January 2019 Data

Managed Care Organization	Cook County Enrollment	Cook County Market Share
*CountyCare	325,556	31.5%
Meridian (a WellCare Co.)	245,422	23.8%
Blue Cross Blue Shield	238,732	23.1%
IlliniCare	109,166	10.6%
Molina	68,166	6.6%
*Next Level	45,230	4.4%
Total	1,032,272	100.0%

* Only Operating in Cook County



2018 Operations Metrics: Call Center & Encounter Rate

Key Metrics	State Goal	Performance		
		Oct	Nov	Dec
Member & Provider Services Call Center Metrics				
Abandonment Rate	< 5%	0.79%	0.39%	0.79%
Hold Time (minutes)	1:00	0:06	0:05	0:11
% Calls Answered < 30 seconds	> 80%	95.39%	95.22%	91.42%
Quarterly				
Claims/Encounters Acceptance Rate	95%	96.99%		



2018 Operations Metrics: Claims Payment

Key Metrics	State Goal	Performance		
		Oct	Nov	Dec
Claims Payment Turnaround Time & Volumes				
% of Clean Claims Adjudicated < 30 days	90%	94.2%	95.6%	97.1%
% of Claims Paid < 30 days	90%	35.2%	62.5%	65.7%
Total Claims Adjudicated	N/A	397,673	452,893	436,813



2018 Operations Metrics: Overall Care Management Performance

Key Metrics	Market %	Performance		
		Oct	Nov	Dec
Completed HRS/HRA (all populations)				
Overall Performance	40%	53.4%	57.0%	57.4%
Completed Care Plans on High Risk Members				
Overall Performance	65%	69.7%	64.7%	67.4%

- CountyCare's high risk percentage exceeds the State's requirement of 2% for Family Health Plan and 5% for Integrated Care Program.



CCH Full Board Meeting March 2019



Ekerete Akpan, Chief Financial Officer

March 29, 2019



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Systems-wide Financials, Observations, Metrics and Volumes



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Income Statement for the Two Months ending Jan.- 2019(in thousands)

CCH Systemwide	Year-To-Date		Variance	
	Actual	Budget	\$	%
<u>Operating Revenue</u>				
Net Patient Service Revenue	98,576	124,550	(25,974)	-21%
CountyCare Capitation Revenue	367,882	303,625	64,257	21%
Access Payments	5,950	5,950	-	0%
Other Revenue	666	2,167	(1,501)	-69%
Total Operating Rev	473,073	436,292	36,782	8%
<u>Operating Expenses</u>				
Salaries & Benefits	109,113	118,806	9,693.42	8%
Overtime	8,376	5,967	(2,409)	-40%
Contracted Labor	7,090	5,687	(1,404)	-25%
Pension*	54,560	54,560	-	
Supplies & Materials	3,927	10,359	6,431	62%
Pharmaceutical Supplies	17,136	13,471	(3,664)	-27%
Purch. Svs., Rental, Oth.	44,906	51,471	6,565	13%
External Claims Expense	322,133	236,095	(86,038)	-36%
Insurance Expense	4,447	4,906	459	9%
Depreciation	5,784	5,784	-	0%
Utilities	2,617	1,648	(970)	-59%
Total Operating Exp	580,090	508,753	(71,337)	-14%
Operating Margin	(107,017)	(72,462)	(34,555)	-48%
Operating Margin %	-23%	-17%	-6%	-36%
Non Operating Revenue	43,205	43,205	-	0%
Net Income/(Loss)	(63,812)	(29,257)	(34,555)	-118%



Financial Metrics

Metric	As of end Jan- 18/YTD	As of end Jan- 19/YTD	Target
Days Cash On Hand**	21	30	60
Operating Margin***	-5.9%	-11.1%	-5.4%
Overtime as Percentage of Gross Salary	9.4%	8.1%	5.0%*
Average Age of Plant (Years)	23.3	23.2	10.7

*Days Cash on Hand - CCH target 60 days, Moody's 198 days . Overtime as percentage of Gross Salary – CCH target 5% , Moody's 2%

** Days Cash in Hand – Point in time i.e. as of end October for each year

***Excludes Pension Expense-Target based on compare group consisting of 'like' health systems : Alameda Health System, Nebraska Medical Center, Parkland Health & Hospital System, and UI Health



Revenue Cycle Metrics

Metric	Average FYTD 2019	Dec-18	Jan-19	Benchmark /Target
Average Days in Accounts Receivable <i>(lower is better)</i>	99.5	99	100	45.85 – 54.9*
Discharged Not Finally Billed Days <i>(lower is better)</i>	10.2	9.9	10.5	7.0
Claims Initial Denials Percentage <i>(lower is better)</i>	23%	22%	23%	20%

Definitions:

Average Days in Accounts Receivable: Total accounts receivable over average daily revenue

Discharged Not Finally Billed Days: Total charges of discharge not finally billed over average daily revenue

Claims Initial Denials Percentage: Percentage of claims denied initially compared to total claims submitted.

* Source HFMA Key Hospital Statistics and Ratio Margins – Posted 2014



Observations

Some volumes are challenging versus FY18 targets

- Primary Care visits are up by 1% versus to FY18, and down 4% versus FY19 target
- Specialty Care visits are up by 3% versus FY18, and down 2% versus FY19 target
- Surgical Cases are down by 3% versus FY18, and down 9% versus FY19 target
- Inpatient Discharges are down 11% versus FY18, and flat versus FY19 target
- LOS is down 11% versus FY18, and flat versus FY19 target
- Emergency Department visits are down 4% versus FY18, and flat versus FY19 target
- Deliveries are up by 3% versus FY18, and down 7% versus FY19 target
- Case Mix Index is flat versus FY18, and flat versus FY19 target
- System-wide uninsured numbers, captured by visit held 45% (Provident 36%, ACHN 45%, Stroger 48%)
- CountyCare sustained 326,116 members in January 2019 with CCH capturing \$31.6M in clinical services.



System Payor Mix By Visit

All Medicare = 16%

2%

4%

12%

28%

Uninsured
45%

5%
5%

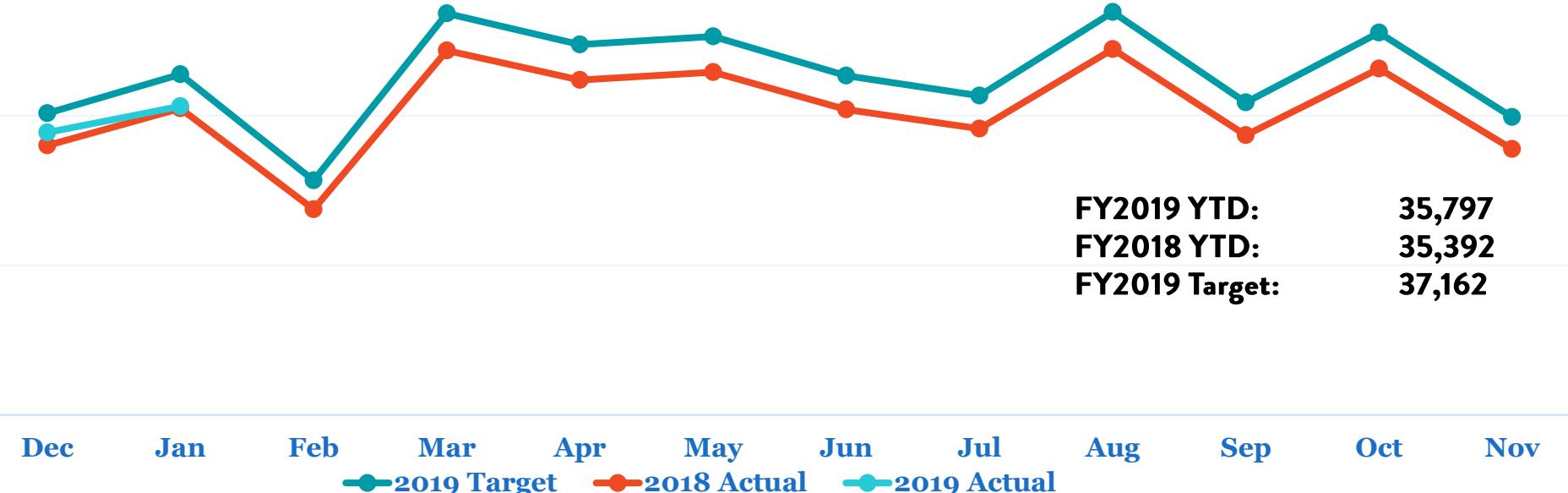
All Medicaid = 33%

- Uninsured
- Commercially Insured
- Medicaid
- Medicaid Managed Care
- Medicare
- Medicare Managed Care
- Other

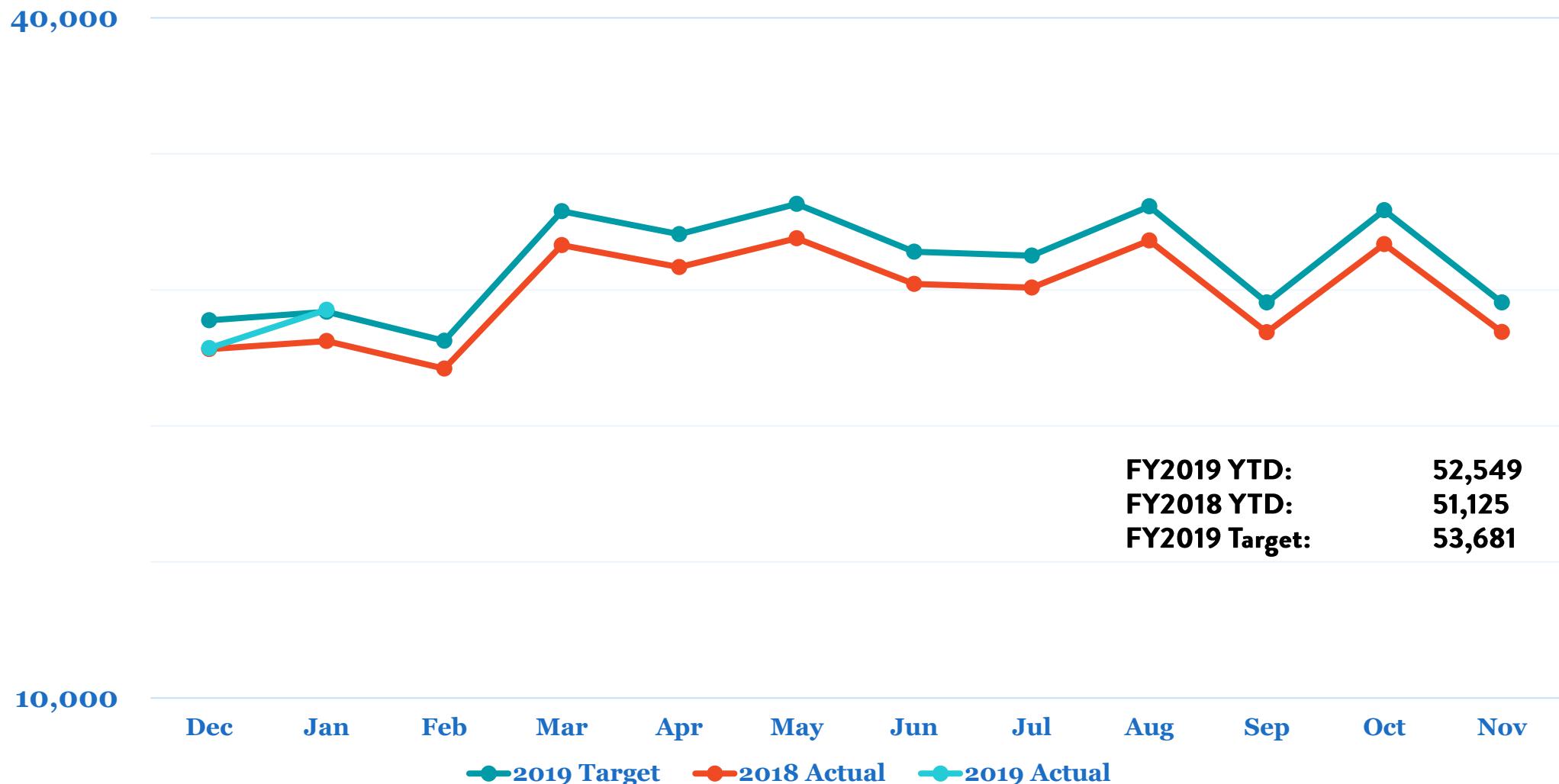


Primary Care Provider Visits

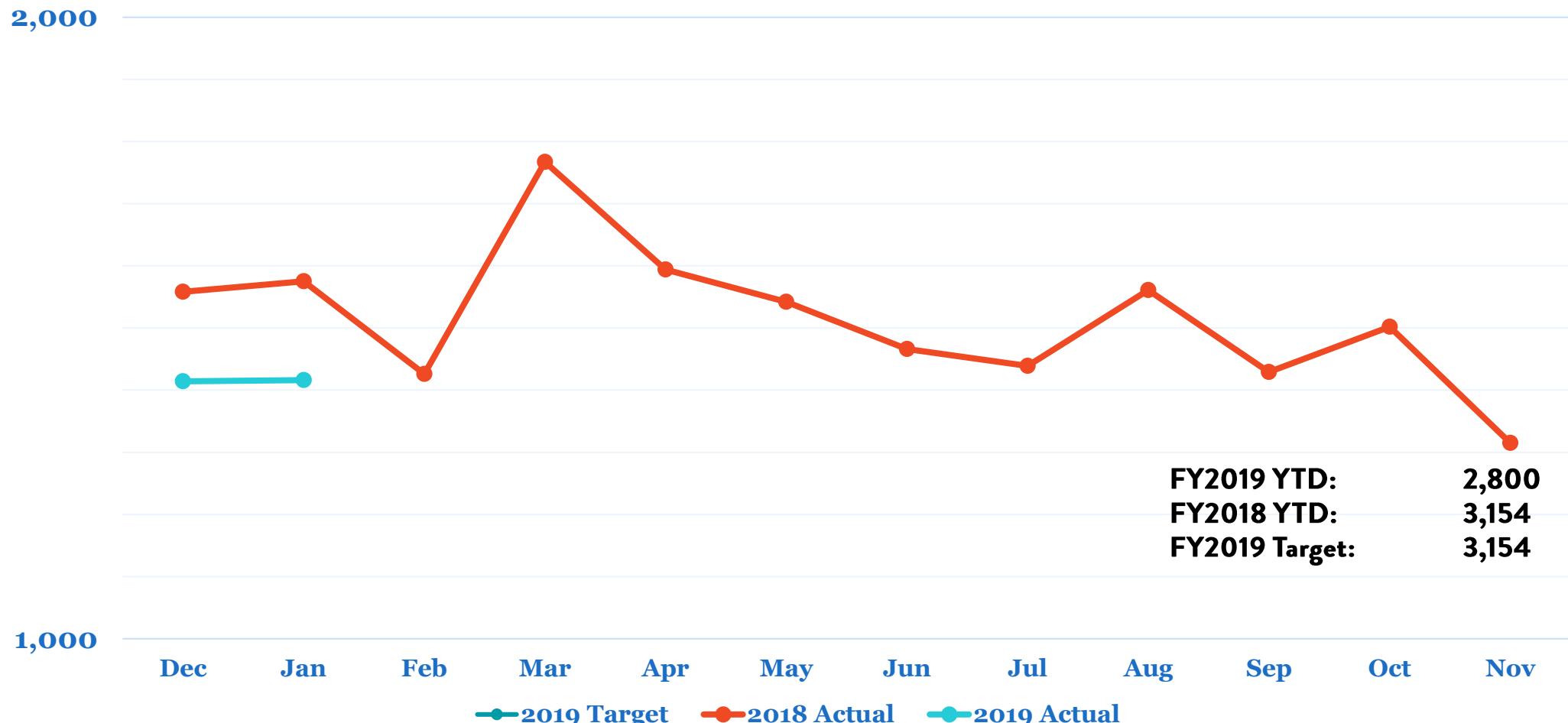
30,000



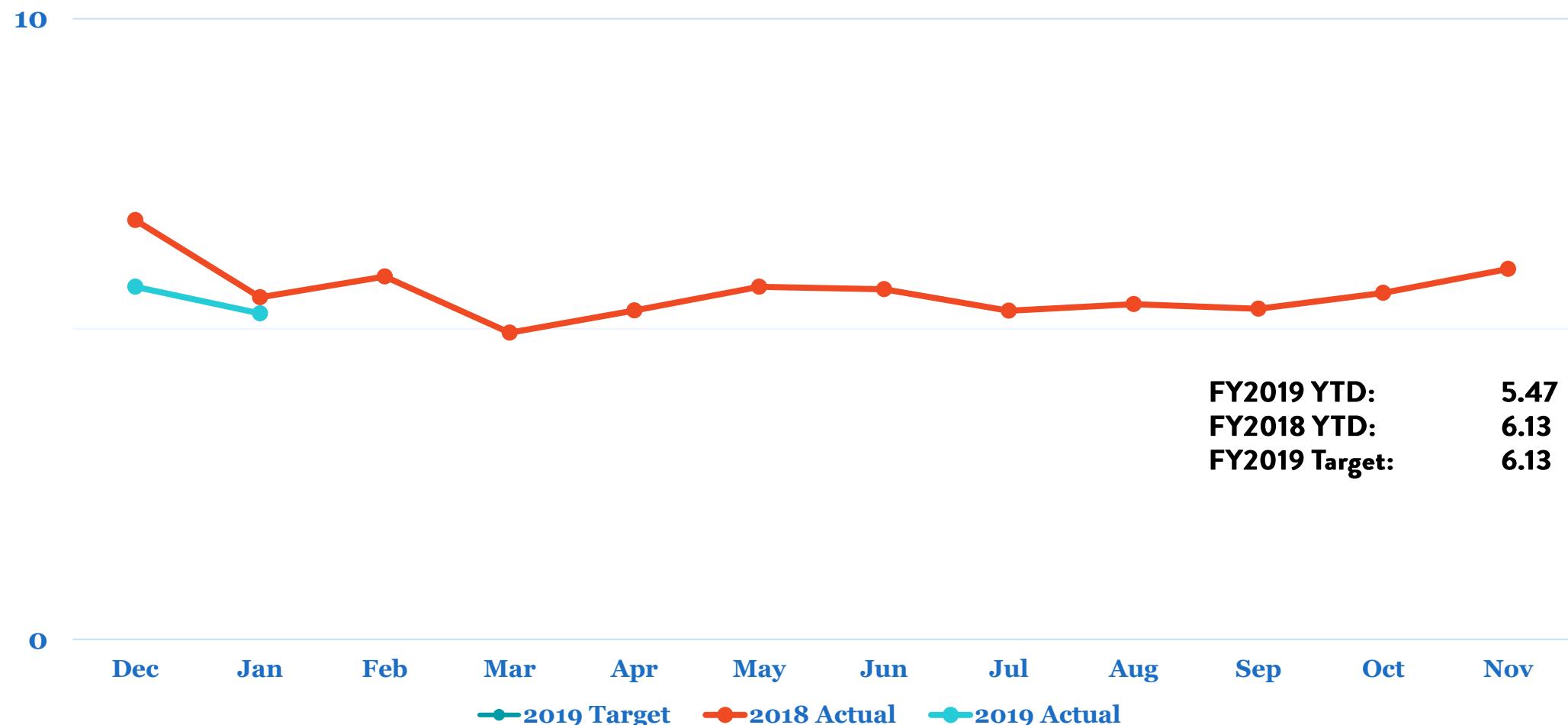
Specialty Care Provider Visits



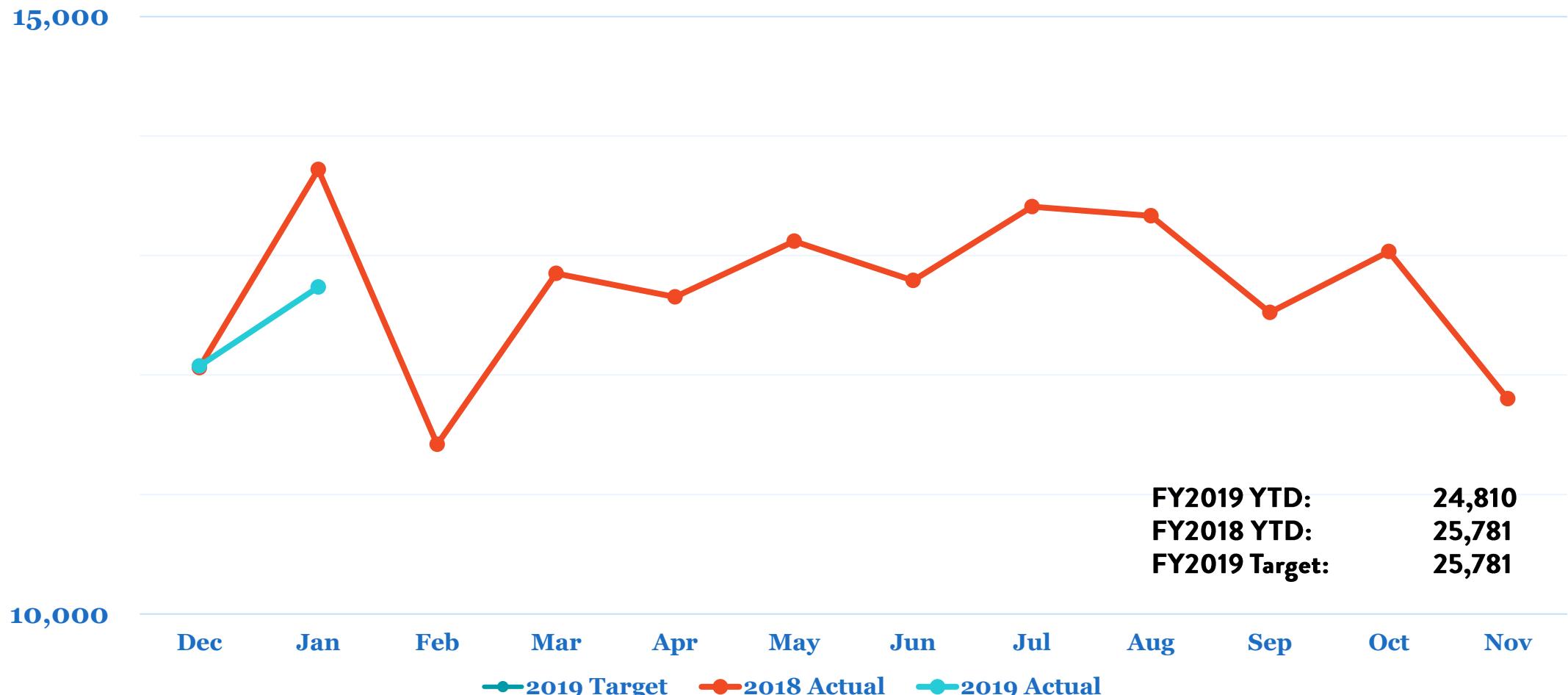
Total Inpatient Discharges



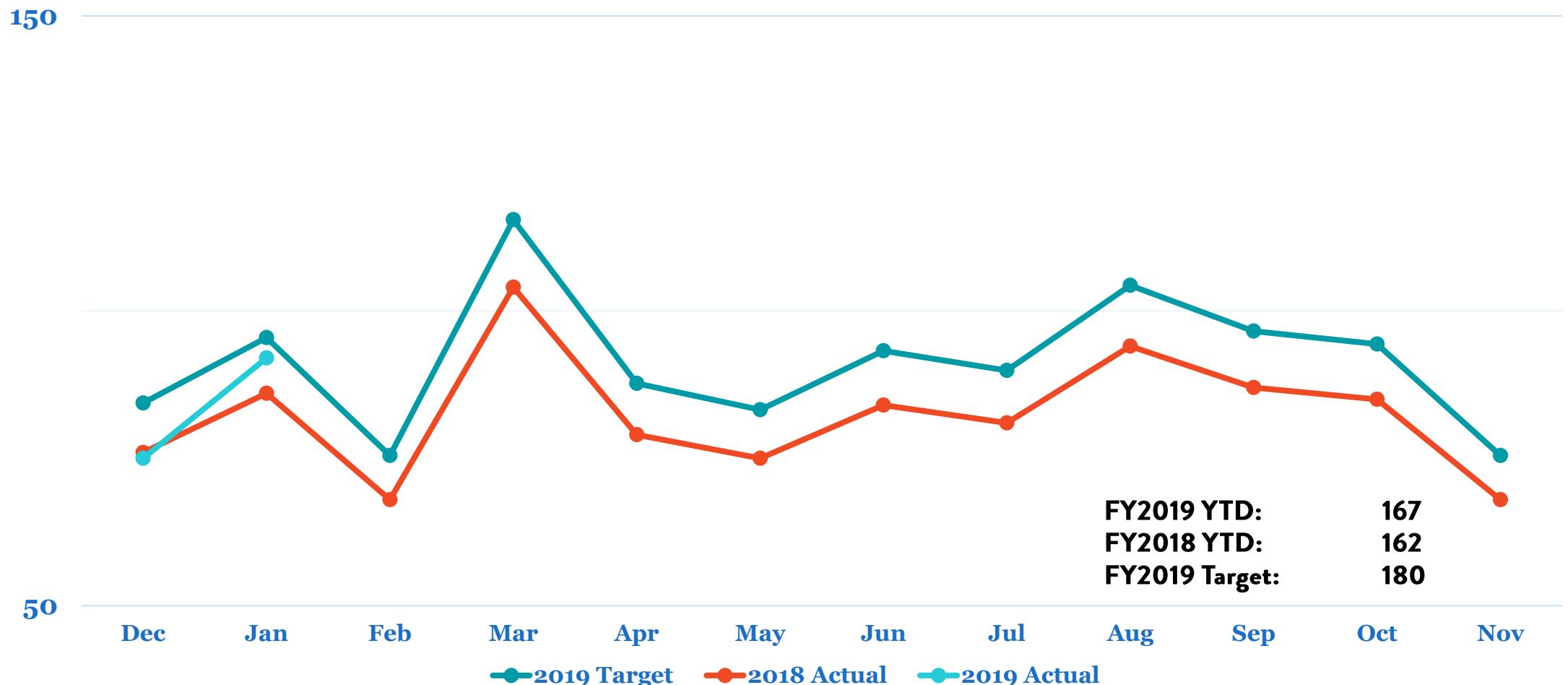
Average Length of Stay



Total Emergency Room Visits



Total Deliveries



Total Surgical Cases

1,500

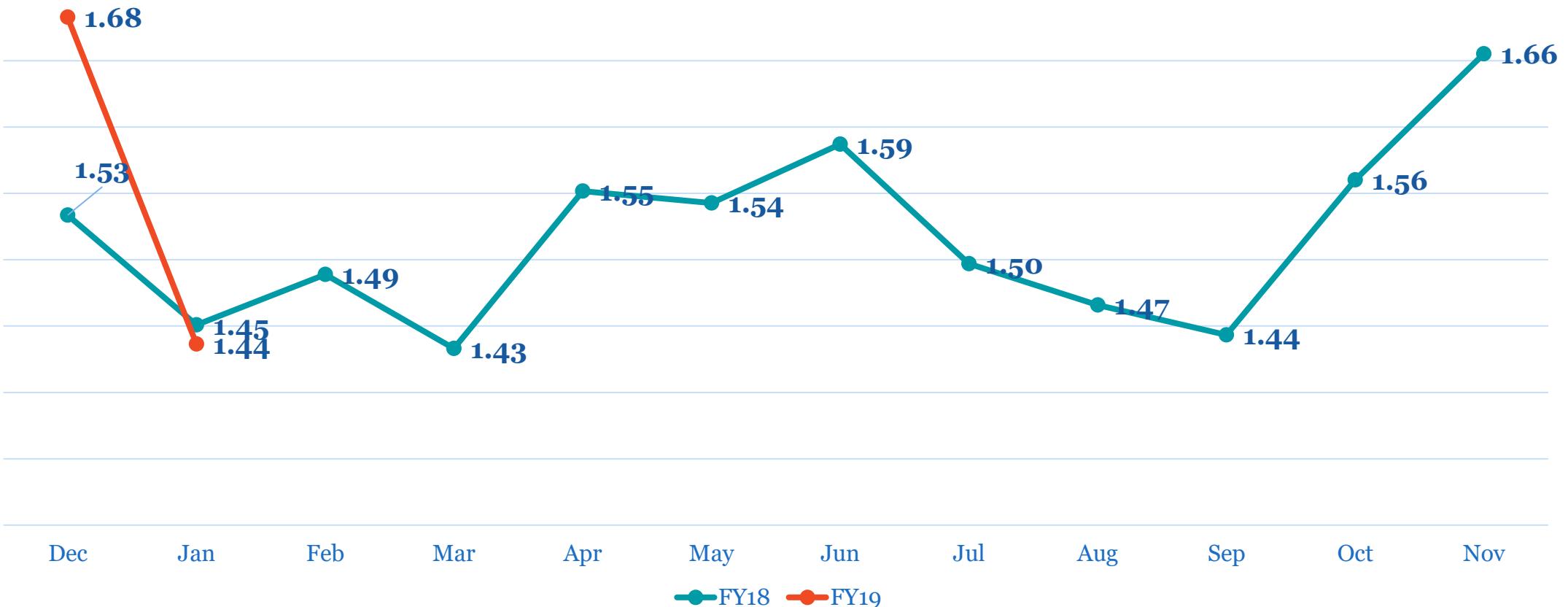
1,000

Dec Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov

● 2019 Target ● 2018 Actual ● 2019 Actual

FY2019 YTD: 2,316
FY2018 YTD: 2,392
FY2019 Target: 2,536

Case Mix Index



Questions?



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QPS Quality Dashboard

March 29, 2019



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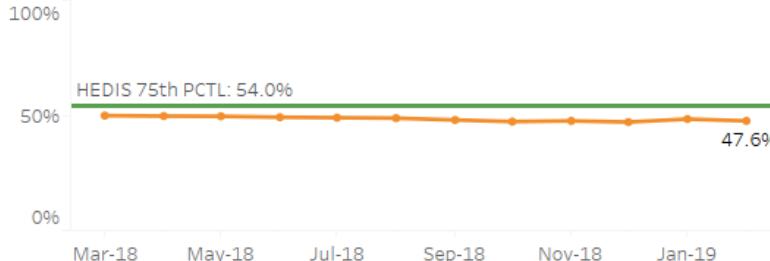


COOK COUNTY HEALTH

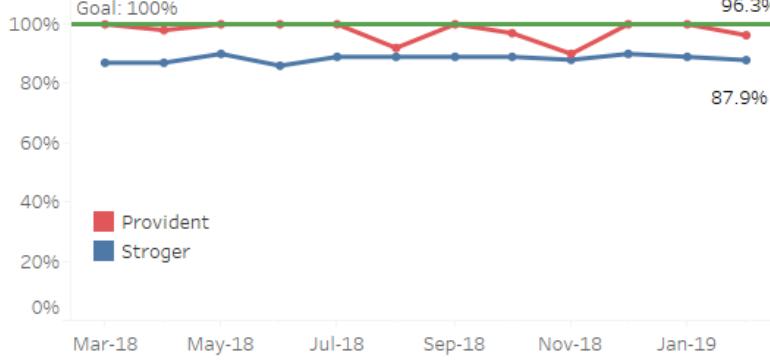
Quality
Dashboard
March 22, 2019

Health Outcomes

HEDIS - Diabetes Management: HbA1c < 8%



Core Measure - Venous Thromboembolism (VTE) Prevention

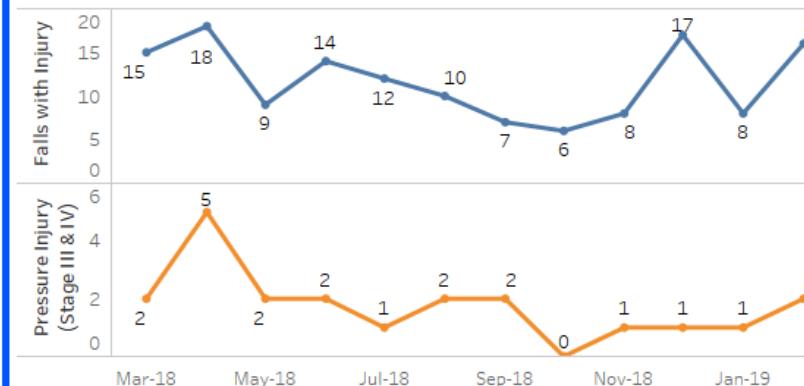


30 Day Readmission Rate

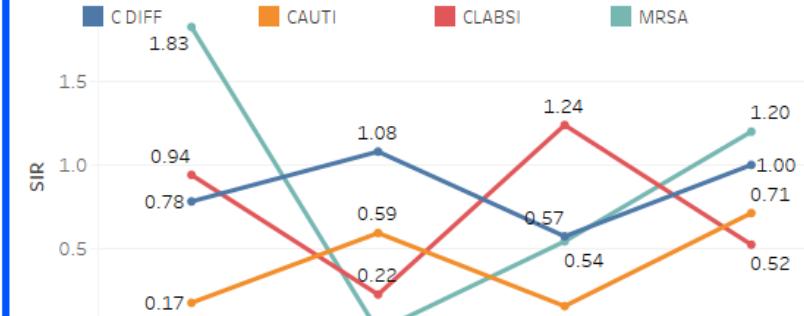


Patient Safety

Hospital Acquired Conditions



Hospital Acquired Infections



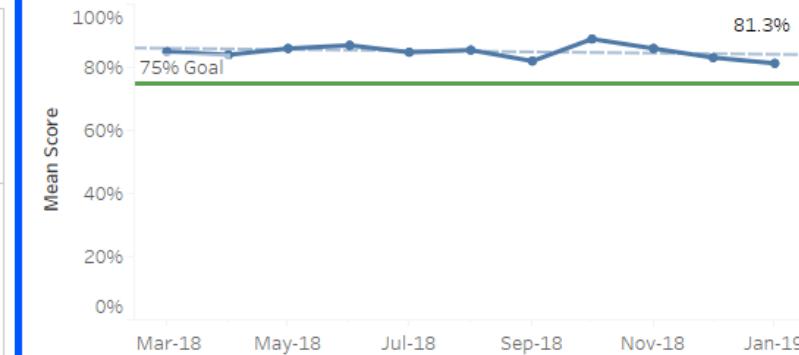
SIR (Standardized Infection Ratio) is a summary measure which compares the actual number of Healthcare Associated Infections (HAI) in a facility with the baseline data for standard population. SIR > 1.0 indicates more HAIs were observed than predicted, conversely SIR of < 1.0 indicates that fewer HAIs were observed than predicted.

Month	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19
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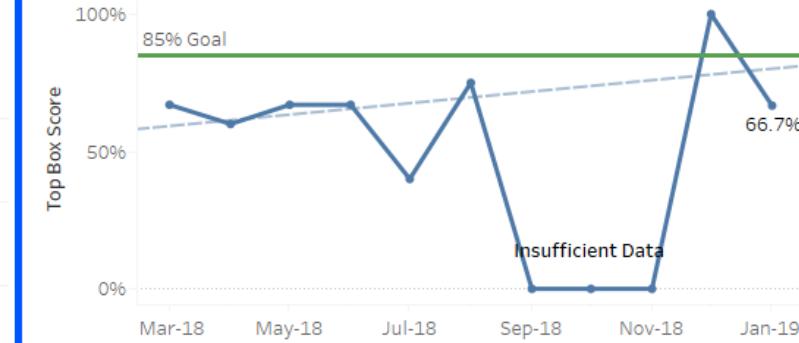
CDIFF	2	6	11	4	5	4	2	10	4	4	6	2
CAUTI	1	1	2	1	0	1	0	0	1	3	1	1
CLABSI	1	0	1	0	2	3	0	0	0	2	1	0
MRSA	1	0	0	0	0	1	0	0	1	0	1	0

Utilization

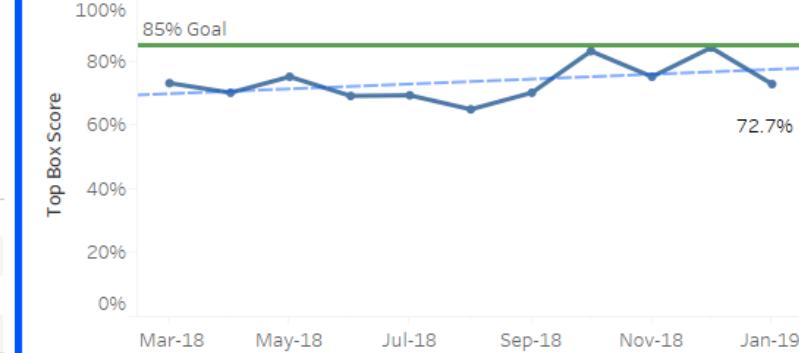
CCHC--Overall Clinic Assessment



Provident--Willingness to Recommend Hospital

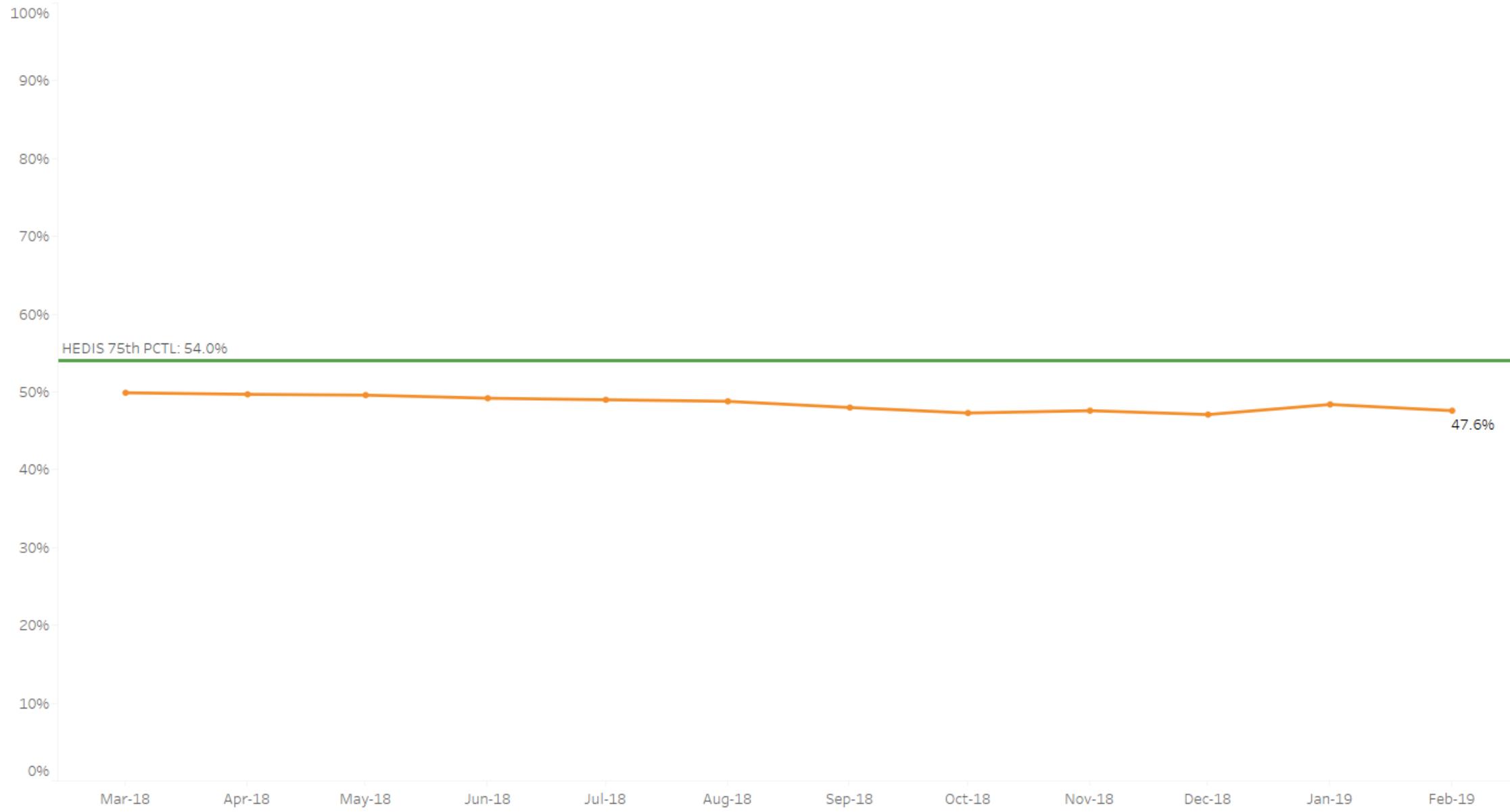


Stroger--Willingness to Recommend Hospital

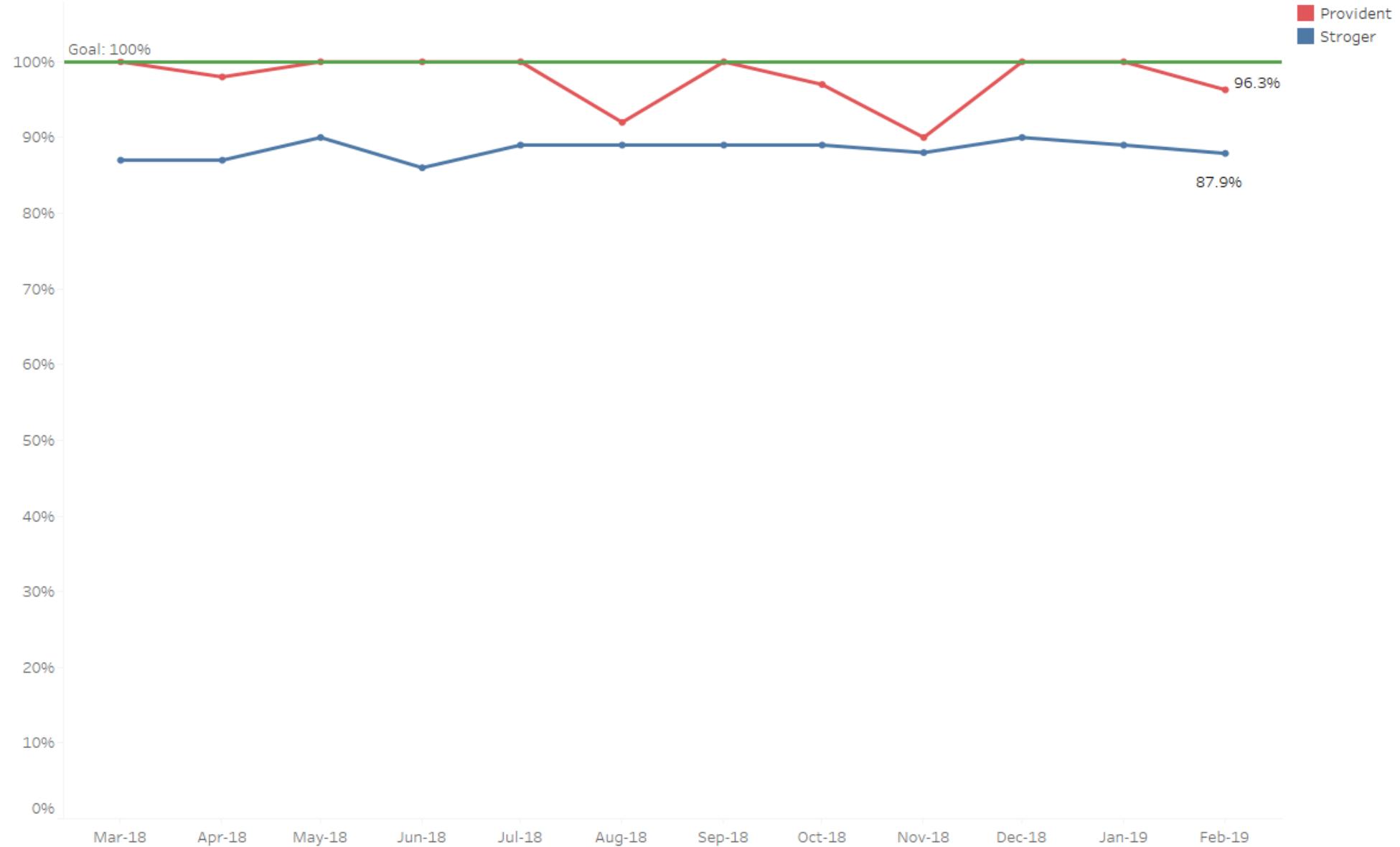


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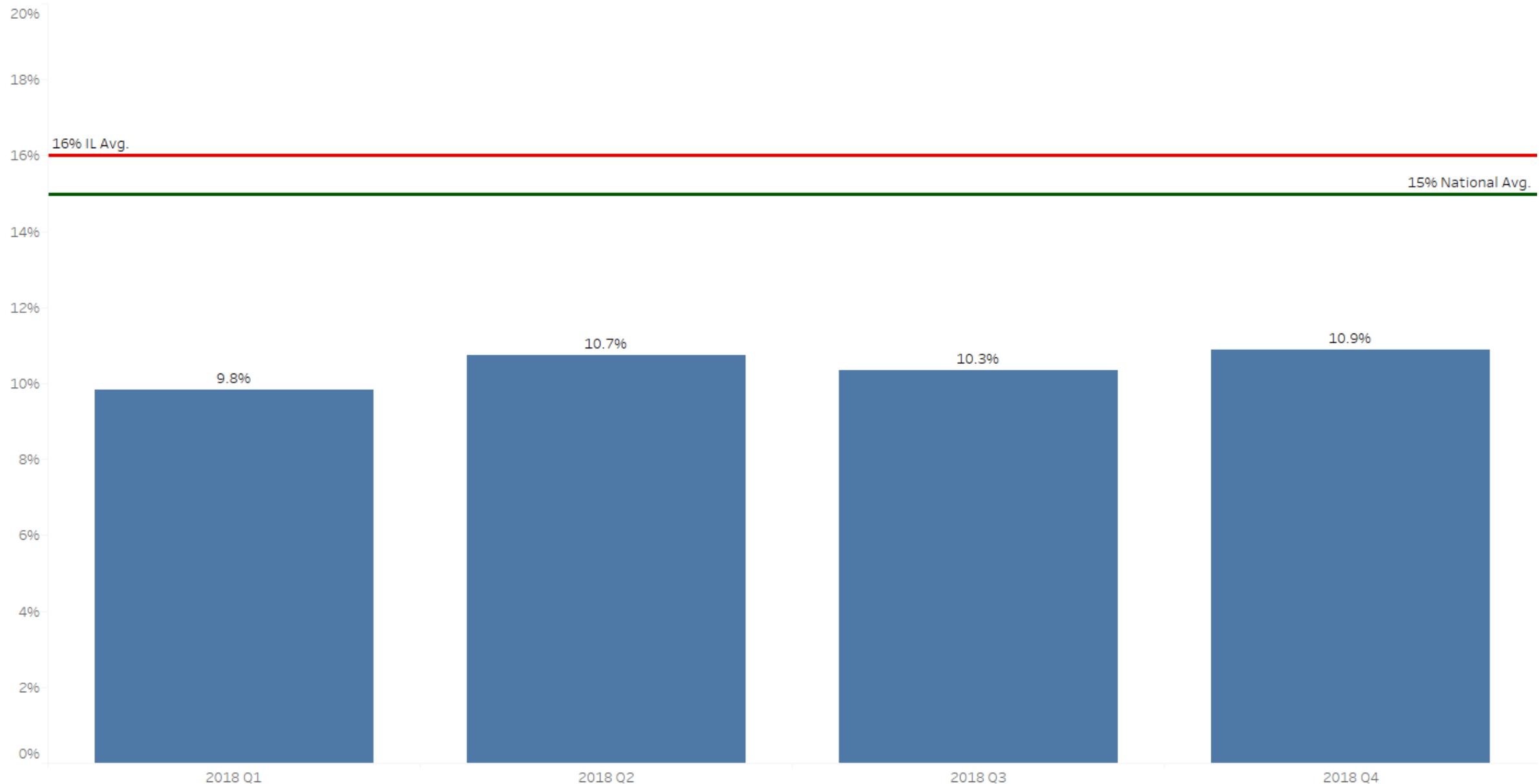
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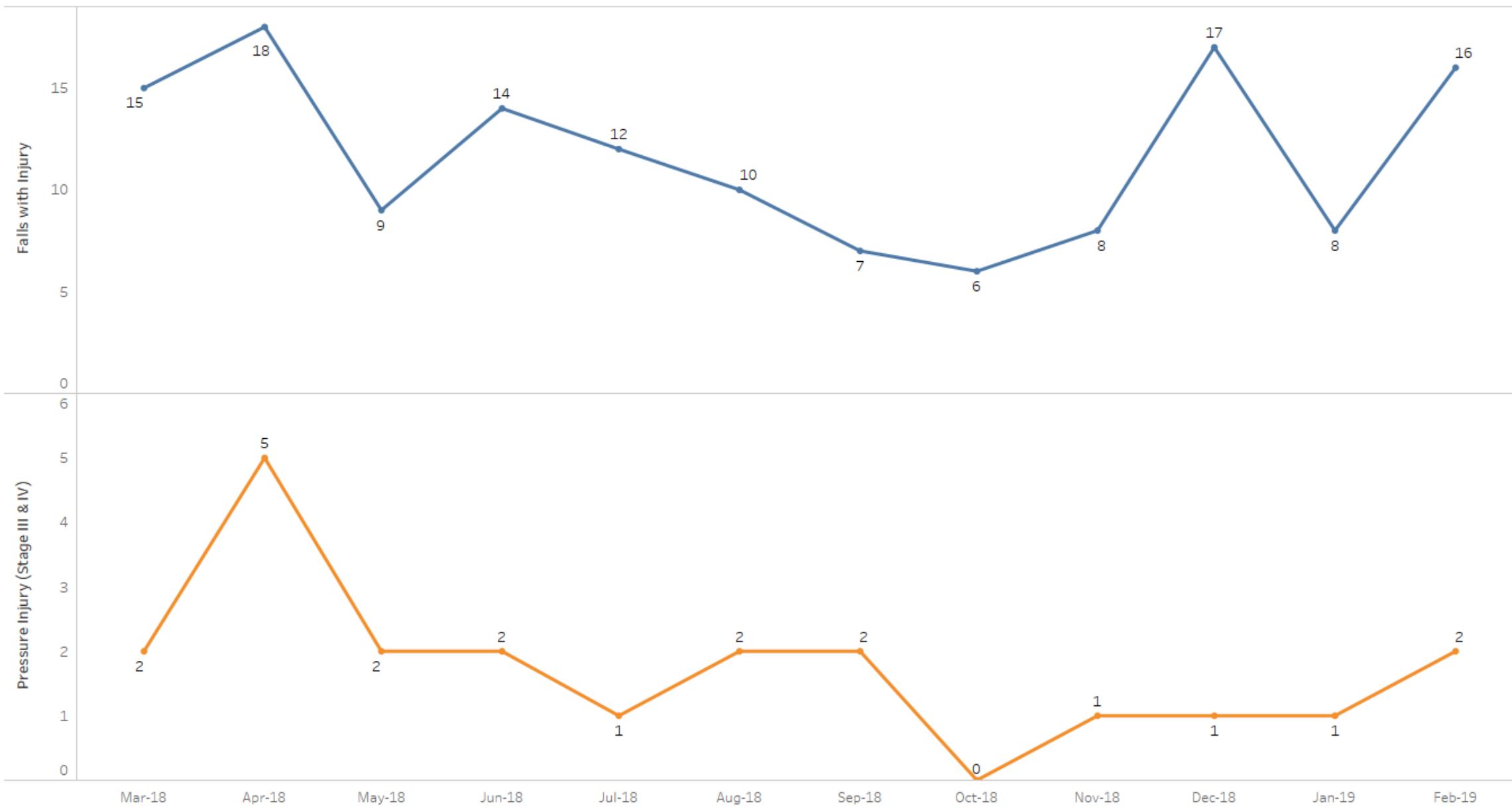
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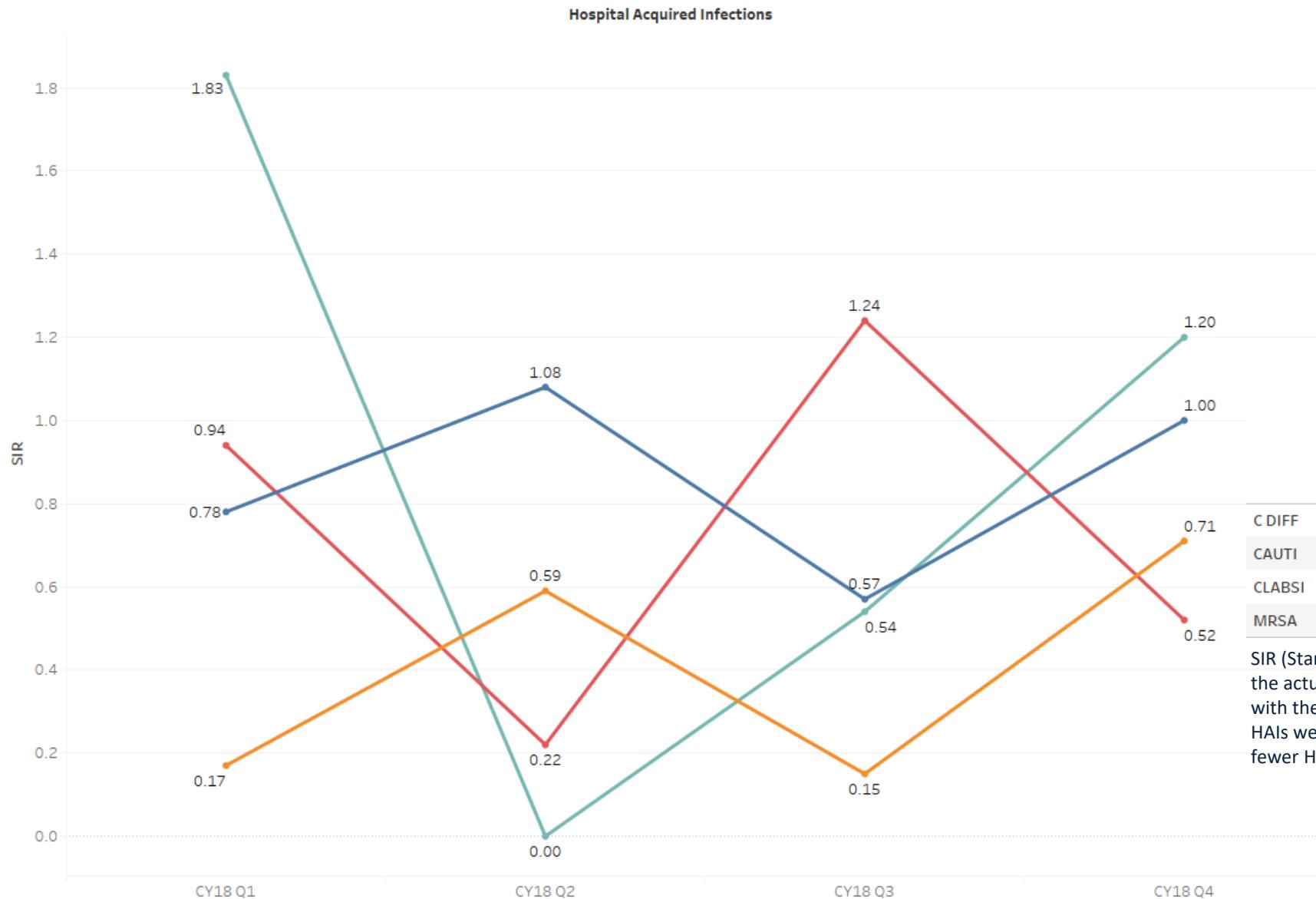


30 Day Readmission Rate



Hospital Acquired Conditions



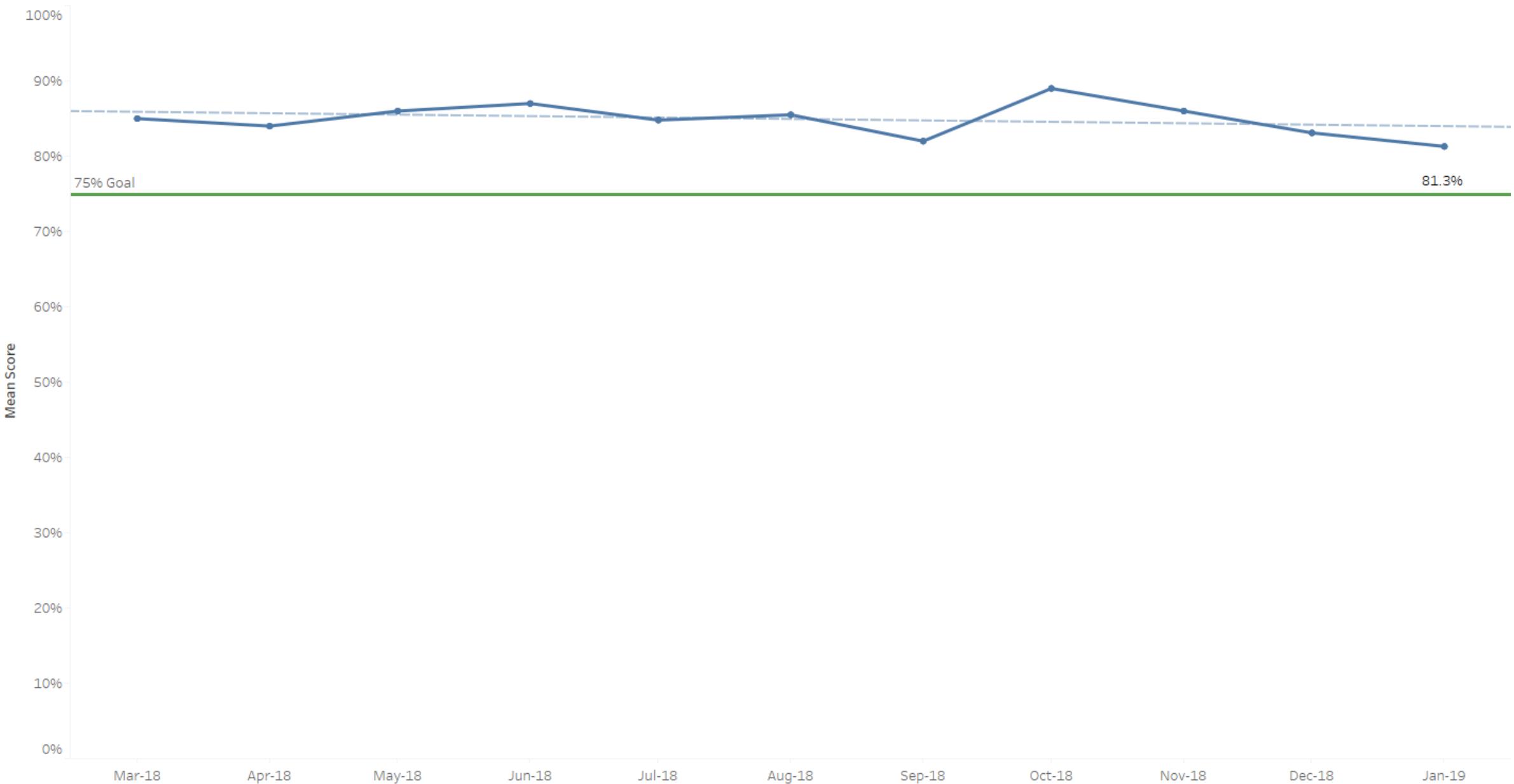


Hospital Acquired Infections

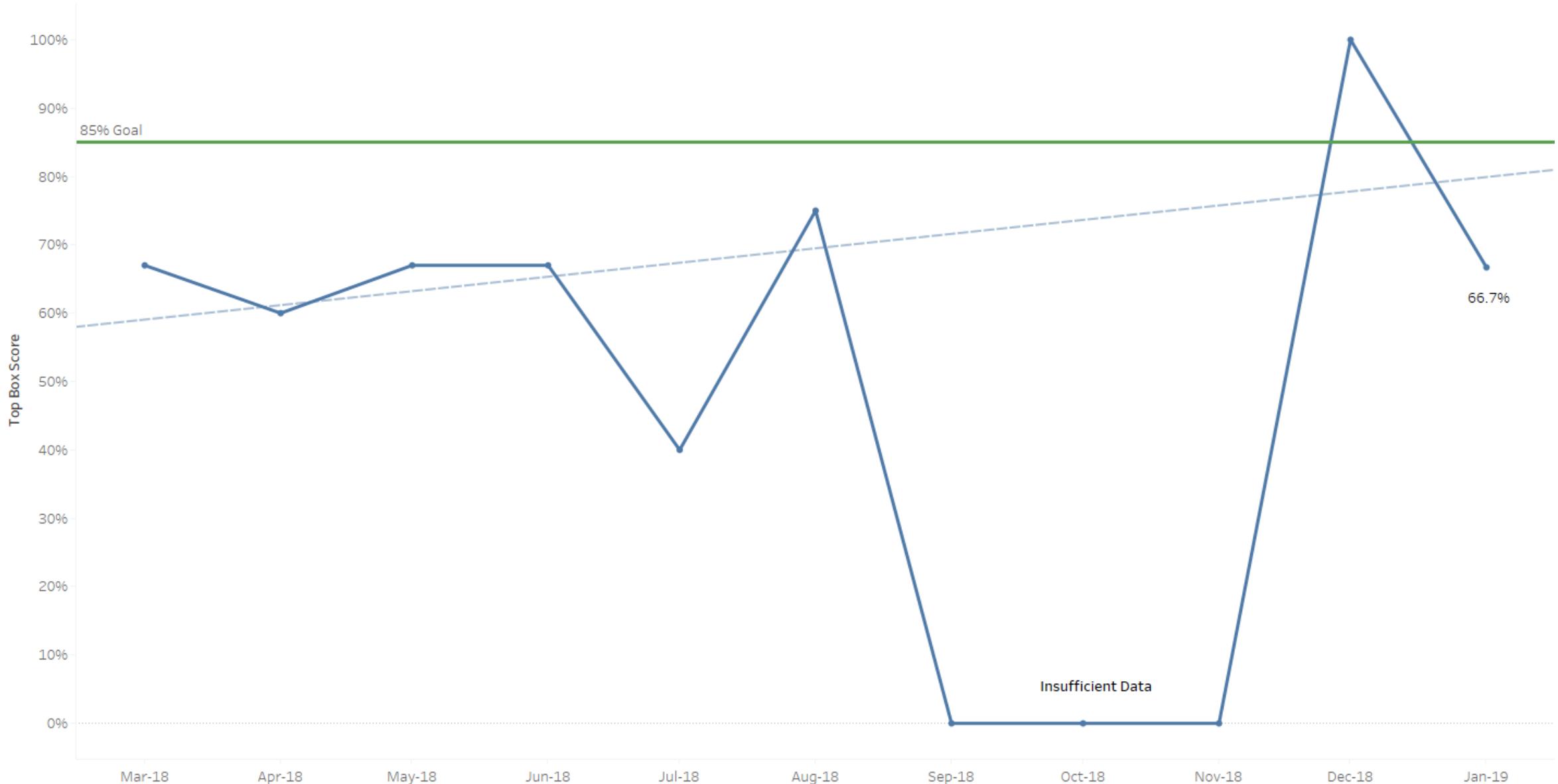
	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19
C DIFF	2	6	11	4	5	4	2	10	4	4	6	2
CAUTI	1	1	2	1	0	1	0	0	1	3	1	1
CLABSI	1	0	1	0	2	3	0	0	0	2	1	0
MRSA	1	0	0	0	0	1	0	0	1	0	1	0

SIR (Standardized Infection Ratio) is a summary measure which compares the actual number of Healthcare Associated Infections (HAI) in a facility with the baseline data for standard population. SIR > 1.0 indicates more HAI's were observed than predicted, conversely SIR of < 1.0 indicates that fewer HAI's were observed than predicted.

CCHC-Overall Clinic Assessment



Provident--Willingness to Recommend Hospital



Stroger--Willingness to Recommend Hospital

